## Best Available Copy

	Effective December 29, 1999											
			SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY						
	FOR	NUMB	ER FILED		NUMBER	EXTRA	1г	RATE	FEE	٣	RATE	FEE
	BASIC FEE		6.20			No. of Paris			345.00	OR	25.50	690.00
	TOTAL CLAIMS	25	minus	20=	· S		1	X\$ 9=		1	CV 2 CA	90
	NDEPENDENT CLAI	мѕ Ч	minus	3 =			1 F	X39=	<del>                                     </del>	JOR	1/70	
. [	MULTIPLE DEPENDE	1 }		<del> </del>	OR	A/6=	78					
Ţ	f the difference in column 1 is less than zero, enter "0" in column 2							+130=		OR	+260=	
1	CLAIMS AS AMENDED - PART II							TOTAL	L	OR	TOTAL	838
4		. <u>.</u> 9	SMALL	ENTITY	OR	OTHER SMALL						
		CLAIMS REMAINING AFTER MENDMENT		H N PRE	Diumn 2) IGHEST IUMBER EVIOUSLY AID FOR	PRESENT EXTRA	lr	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
¥	Total •	26	Minus	••	25	= 1	. ;	X\$ 9=		OR	X\$18=	18-
1	Independent •	4	Minus	<u> </u>	4	<u> </u>		X39=		OR	X78=	
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM.							130=		1	+260=	
4	BEST AVAILABLE COPY						_	TOTAL		OR OR	TOTAL	18-
1	8-29-05	Column 1)	<u>.</u> .		olumn 2)	(Column 3)	ADO	DIT. FEE		Un	ADDIT. FEE	10-
AMENDACIONE	A	CLAIMS REMAINING AFTER MENDMENT		HI NI PRE	GHEST UMBER VIOUSLY ND FOR	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	25	Minus	••	26	=	×	(\$ 9=		OR	X\$18≃	
	FIRST PRESENTA	HON OF M	Minus		4	-	×	(39=		OR	X78=	
-	· MOT PRESERVA	TION OF MC	CHPLE, DEF	PENDE	INT CLAIM		+	130=		OR	+260=	
	•				٠	•	ADD	TOTAL IT. FEE		OR ,	TOTAL ODIT. FEE	
L	((			,	•							
AMENDMENT C		CLAIMS REMAINING AFTER MENDMENT		NU PRE	GHEST IMBER VIOUSLY ID FOR	PRESENT EXTRA	R	ATE	ADDI- FEE		RATE	ADDI- TIONAL FEE
Ž	Total -		Minus	**		=	X	\$ 9= ·		OR	X\$18=	
ME	Independent +		Minus	***		=	-	39=		ŀ	X78=	
F	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							-+	——-j'	OR	-+	
:	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."							30=		OR	+260=	
:	" If the "Highest Number "If the "Highest Number	Previously Paid Previously Pai	d For IN THIS d For IN THIS	SPACE SPACE	is less than	20; enter "20."	ADDI"	T. FEE		OR A	TOTAL DDIT. FEE	
L	The "Highest Number F	reviously Paid	ror (Total or	Indepen	ident) is the I	highest number	found in	the appr	opriate box	in cotu	mn 1.	

Application or Docket Number